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POSITION	INITIALS	ID NO.	DATE
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O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	⊃A	E 8-966	10-31-01

INDEX OF CLAIMS

✔	..... Rejected	N	..... Non-elected
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÷	..... Restricted	O	..... Objected

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If more than 150 claims or 10 actions
staple additional sheet here

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